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16638 U.S. PTO

PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	524592006500
	First Inventor	Richard B. ROTH
	Title	METHODS FOR IDENTIFYING RISK OF BREAST CANCER AND TREATMENTS THEREOF
	Express Mail Label No.	EV 272142936 US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 80] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
5. Oath or Declaration [Total Sheets 1] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	c. <input type="checkbox"/> Statements verifying identity of above copies
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

ACCOMPANYING APPLICATION PARTS

- | | |
|--|---|
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement
(when there is an assignee) | <input type="checkbox"/> Power of
Attorney |
| 11. <input type="checkbox"/> English Translation Document (if applicable) | |
| 12. <input type="checkbox"/> Information Disclosure
Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS
Citations |
| 13. <input type="checkbox"/> Preliminary Amendment | |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) | |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed) | |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent. | |
| 17. <input type="checkbox"/> Other: | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____

Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number: 25225	OR	<input type="checkbox"/> Correspondence address below
Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

Name (Print/Type)	Bruce D. Grant	Registration No. (Attorney/Agent)	47,608
Signature		Date	November 25, 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 272142936 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: NOVEMBER 25, 2003

Signature: (Bruce D. Grant)

sd-172694



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FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>		Complete if Known					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	Not Yet Assigned				
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	Concurrently Herewith				
1,060.00		First Named Inventor	Richard B. ROTH				
		Examiner Name	Not Yet Assigned				
		Art Unit	Not Yet Assigned				
		Attorney Docket No.	524592006500				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES					
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 referencing 524592006500 Deposit Account Name: Morrison & Foerster LLP		Large Entity Small Entity					
The Director is authorized to: (check all that apply)		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		1051	130	2051	65	Surcharge - late filing fee or oath	
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1053	130	1053	130	Non-English specification	
FEE CALCULATION		1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1. BASIC FILING FEE		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Large Entity	Small Entity	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Fee Code	Fee (\$)	1251	110	2251	55	Extension for reply within first month	
1001	770	1252	420	2252	210	Extension for reply within second month	
1002	340	1253	950	2253	475	Extension for reply within third month	
1003	530	1254	1,480	2254	740	Extension for reply within fourth month	
1004	770	1255	2,010	2255	1,005	Extension for reply within fifth month	
1005	160	1401	330	2401	165	Notice of Appeal	
SUBTOTAL (1) (\$)		1402	330	2402	165	Filing a brief in support of an appeal	
385.00		1403	290	2403	145	Request for oral hearing	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
Total Claims	52	1452	110	2452	55	Petition to revive - unavoidable	
Independent Claims	12	1453	1,330	2453	665	Petition to revive - unintentional	
Multiple Dependent		1501	1,330	2501	665	Utility issue fee (or reissue)	
Extra Claims	32	1502	480	2502	240	Design issue fee	
Fee from below	9.00	1503	640	2503	320	Plant issue fee	
Fee Paid	288.00	1460	130	1460	130	Petitions to the Commissioner	
	9	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
	43.00	1806	180	1806	180	Submission of Information Disclosure Stmt	
		8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
		1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
		1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
		1801	770	2801	385	Request for Continued Examination (RCE)	
		1802	900	1802	900	Request for expedited examination of a design application	
		Other fee (specify)					
SUBTOTAL (2) (\$)		*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)		0.00	
675.00							
**or number previously paid, if greater; For Reissues, see above							
SUBMITTED BY		(Complete if applicable)					
Name (Print/Type)	Bruce D. Grant	Registration No. (Attorney/Agent)	47,608	Telephone	(858) 720-7962		
Signature		Date	November 25, 2003				

Application No. (if known):

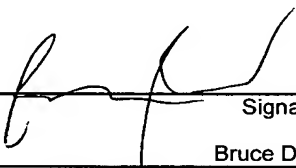
Attorney Docket No.: 524592006500

Certificate of Express Mailing Under 37 CFR 1.10

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Alexandria, VA 22313-1450

on November 25, 2003
Date



Signature

Bruce D. Grant

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Application Data Sheet